

101525

ISSUED BY: [blank] (for additional cross references)

**BEST AVAILABLE COPY**

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	K	1019	3-16
O.I.P.E. CLASSIFIER	K	1019	4-27-01
FORMALITY REVIEW	SC	1019	9/14/01
RESPONSE FORMALITY REVIEW			

**INDEX OF CLAIMS**

- ✓ ..... Rejected
- = ..... Allowed
- (Through numeral)..... Canceled
- + ..... Restricted
- N ..... Non-elected
- I ..... Interference
- A ..... Appeal
- O ..... Objected

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here